Case:18-01254-EAG13 Doc#:20 Filed:05/02/18 Entered:05/02/18 10:38:43 Desc: Main Document Page 1 of 15

# IN THE UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF PUERTO RICO

IN RE.:	*	CASE NO.: 18-01 254 - EAR
ELBA IRIZARRY CASTRO	*	
XXX-XX-7557	*	
Debtor	*	CHAPTER 13

# MOTION TO AMEND AND SCHEDULES D, E/F, J AND CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD

#### TO THE HONORABLE COURT:

Here come the Debtor **ELBA IRIZARRY CASTRO** ("the Debtor") through the undersigned attorney and respectfully show and pray:

- 1. The schedule D has been amended to delete creditor Coop. A/C San Jose.
- 2. The **schedule E/F** has been amended to include creditor Coop. A/C San Jose.
- 3. The **schedule J** has been amended to delete vehicle payments and inform Chapter 13 plan payment
- 4. The Chapter 13 Statement Of Current Monthly Income And Calculation of Commitment Period has been amended to inform commitment period.

WHEREFORE, The Debtor very respectfully requests to this Honorable Court that

this petition be amended according to this motion.

I HEREBY CERTIFY: that on this date I electronically filed the above document with the

Clerk of the court using an CM/ECF System which sends notification of such filing to

Chapter 13 Trustee, and to any creditors if any CM/ECF user. I further certify that I have

served this notice by depositing true and correct copy thereof in the United States Mail, to

non user creditors.

In Mayaguez, Puerto Rico, this 2<sup>nd</sup> day of May 2018.

/s/ LCDA GLORIA M. JUSTINIANO USDC- PR - 207603 Ensanchez Martínez Calle A. Ramírez Silva # 8 Mayagüez, PR 00680-4714 (787) 831-3577 & 805-2945

Email: justinianolaw@gmail.com

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Fill in this infor				
Debtor 1				
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	DISTRICT OF PUERTO RICO		
Case number	18-01254			
(if known)				Check if this is an amended filing

### Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

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		Document	Page 4	of 15	
Fill in th	is information to identify your ca	se:			
Debtor 1	ELBA IRIZARRY CA	Middle Name	Last Name		
Debtor 2					
(Spouse if,	filing) First Name	Middle Name	Last Name		
United S	tates Bankruptcy Court for the:	DISTRICT OF PUERTO RICO			
Case nu	mber <b>18-01254</b>				
(if known)					☐ Check if this is an
					amended filing
	l Form 106E/F				40/45
	lule E/F: Creditors Wh				12/15 PRIORITY claims. List the other party to
Schedule Schedule left. Attac	G: Executory Contracts and Unexpire D: Creditors Who Have Claims Secur h the Continuation Page to this page. case number (if known).	ed Leases (Official Form 106G). Do ed by Property. If more space is n If you have no information to rep	o not include a leeded, copy tl	iny creditors with partially s ne Part vou need, fill it out, i	Property (Official Form 106A/B) and on secured claims that are listed in number the entries in the boxes on the op of any additional pages, write your
Part 1:	List All of Your PRIORITY Unse	ecured Claims			
1. Do a	ny creditors have priority unsecured	claims against you?			
■ N	o. Go to Part 2.				
□Y	es.				
Part 2:	List All of Your NONPRIORITY	Unsecured Claims			
3. Do a	ny creditors have nonpriority unsecu	red claims against you?			
□N	o. You have nothing to report in this par	t. Submit this form to the court with y	your other sche	dules.	
<b>■</b> Y	os.				
4. List	all of your nonpriority unsecured claic cured claim, list the creditor separately fone creditor holds a particular claim, list	or each claim. For each claim listed.	. identify what to	oe of claim it is. Do not list cla	aims already included in Part 1. If more
iait	<b>~</b> .				Total claim
4.1	Banco Popular De Puerto Ric	Last 4 digits of acco	ount number	2512	\$10,000.00
	Nonpriority Creditor's Name	,o		AV 1 A	
	PO Box 71375	When was the debt	incurred?	2016	
-	San Juan, PR 00936-7077  Number Street City State ZIp Code	As of the date you f	file the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	As of the date you'l	no, the olumn	or officer an indicapply	
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	Unliquidated			
		☐ Disputed			
	Debtor 1 and Debtor 2 only	T ANONDRIOD	ITY unsecured	l claim:	
	☐ At least one of the debtors and anoti				
	debt	unity	g out of a sepa	ration agreement or divorce to	nat you did not
	is the claim subject to offset?	report as priority clair			
	■ No		State of the state	g plans, and other similar deb	ts
	Yes	Other. Specify	PERSONAL	LOAN	

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Debtor	1 ELBA IRIZARRY CASTRO		Case number (if know)	18-01254			
4.2	Banco Popular De Puerto Rico	Last 4 digits of account number			\$3,000.00		
	Nonpriority Creditor's Name PO Box 71375	When was the debt incurred?	2017				
	San Juan, PR 00936-7077  Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply				
	Who incurred the debt? Check one.	, <b></b> ,					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce t	hat you did not			
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar del	ots			
	☐ Yes	Other. Specify CREDIT CA	ARD				
4.3	Coop. A/C San Jose	Last 4 digits of account number	3603		\$22,000.00		
	Nonpriority Creditor's Name  106 Calle Federico Degetau	When was the debt incurred?	1/1/2018				
	Aibonito, PR 00705  Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	•					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:				
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sep report as priority claims	aration agreement or divorce	that you did not			
	M No	Debts to pension or profit-shari					
	Yes	Other. Specify AUTO LO	N THAT WAS NOT R	EGISTERED			
4.4	Firstbank	Last 4 digits of account number	8797		\$5,000.00		
	Nonpriority Creditor's Name	When was the debt incurred?	2015				
	PO Box 9146 San Juan, PR 00908-0146	When was the dept incurred:	2013				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	Disputed	ad alabas				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	Student loans	paration agreement or diverse	that you did not			
	debt Is the claim subject to offset?	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>					
	■ No	Debts to pension or profit-shar	ing plans, and other similar d	ebts			
	☐ Yes	Other. Specify PERSONA	AL LOAN				

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1 ELBA IRIZARRY CASTRO	A CONTRACTOR OF THE CONTRACTOR	* 400 00
Firstbank Nonpriority Creditor's Name	Last 4 digits of account number	\$400.00
PO Box 9146	When was the debt incurred? 2017	
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Is the claim subject to offset?	□ Debts to pension or profit-sharing plans, and other similar debts	
■ No		
Yes	■ Other. Specify CREDIT CARD	
Island Finance	Last 4 digits of account number 2254	\$5,000.0
Nonpriority Creditor's Name		
PO Box 195369	When was the debt incurred? 2014	
P/C Banco Santander De Puerto Rico		
San Juan, PR 00936		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
■ No	The second production of the second s	
Yes	Other. Specify PERSONAL LOAN	
Sears	Last 4 digits of account number	\$300.0
Nonpriority Creditor's Name		
PO Box 183081	When was the debt incurred? 2017	
Columbus, OH 43218-3081  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify CREDIT CARD	

Part 4: Add the Amounts for Each Type of Unsecured Claim

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 ELBA IRIZARRY CASTRO

Case number (if know)

18-01254

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
			8		
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6g.	\$	0.00
	6h.	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount	6i.	Ť	
	OI.	here.		\$	45,700.00
		T total and the said Process of the control of	e:	s	45 700 00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	<b>a</b> —	45,700.00

		to identif	r caec:					
1-111 tr	this information	to identity you	ii case.					
Debto	or 1 EL	BA IRIZAR	RY CAS	rro			ck if this is: An amended filing	
Debto							A supplement showing 13 expenses as of the	ng postpetition chapter ne following date:
(Spot	use, if filing)							
Unite	d States Bankruptc	y Court for the:	DISTRIC	CT OF PUERTO RICO			MM / DD / YYYY	
	number 18-01	254						
(If kn	own)							
Of	ficial Forn	า 106J						
Sc	hedule J	: Your E	Expen	ses				12/15
info	ns complete and rmation. If more nber (if known).	space is nee	eded, atta	If two married people are ch another sheet to this to n.	e filing together, b form. On the top o	oth are equ f any additi	ially responsible for onal pages, write yo	our name and case
Part		Your House	hold		A A A A A A A A A A A A A A A A A A A			
1.	Is this a joint c							
	No. Go to lin			-ta bayaabald2				
		ebtor 2 live i	n a separ	ate household?				
	□ No □ Yes.	Debtor 2 mus	t file Offici	al Form 106J-2, <i>Expense</i> s	for Separate Hous	ehold of De	otor 2.	
2.	Do you have d	ependents?	■ No					
	Do not list Debt Debtor 2.		☐ Yes.	Fill out this information for each dependent	Dependent's rela Debtor 1 or Debto	or 2	Dependent's age	Does dependent live with you?
	Do not state the							□ No □ Yes
	dependents na	mes.						□ No
								☐ Yes
								□ No
								☐ Yes
								□ No □ Yes
_	_							∟ı Yes
3.	Do your exper expenses of p		han	No				
	yourself and y			Yes				
Pai	t 2: Estimate	e Your Ongoi	ng Month	ly Expenses				
ex	timate your expe censes as of a d clicable date.	enses as of y late after the	our bankr bankrupte	ruptcy filing date unless you	you are using this plemental <i>Schedu</i>	form as a s le J, check	supplement in a Cha the box at the top o	f the form and fill in the
Inc	lude expenses i	paid for with	non-cash	government assistance	if you know			
the	value of such a	issistance an	nd have in	cluded it on Schedule I:	Your Income		Your exp	enses
(01	ficial Form 106l	.)				SMI		
4.	The rental or payments and	home owners any rent for th	ship expe	nses for your residence. or lot.	Include first mortga	ige 4.	\$	0.00
	If not included	d in line 4:						
	4a. Real est	ate taxes				4a.	\$	0.00
		, homeowner	s, or rente	r's insurance		4b.		0.00
	4c. Home m	naintenance, r	epair, and	upkeep expenses		4c.		37.00
				ndominium dues	a sesse a special of	4d.		0.00
5.	Additional mo	ortgage paym	ents for y	our residence, such as h	ome equity loans	5.	<b>D</b>	0.00

page 1

Debtor	ELBA IRIZARRY CASTRO	Case numb	er (if known)	18-01254
	ilities:	6a.	\$	125.00
6a	The state of the s		\$	75.00
6b		6c.		50.00
6c	The state of the s	6d.		30.00
6d			\$	300.00
	od and housekeeping supplies	7. 8.	\$	0.00
	nildcare and children's education costs	9.	\$ \$	50.00
9. <b>CI</b>	othing, laundry, and dry cleaning			60.00
0. Pe	ersonal care products and services	10.	\$	
	edical and dental expenses	11.	\$	150.00
	ansportation. Include gas, maintenance, bus or train fare. o not include car payments.	12.	\$	200.00
3. Ei	ntertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
	naritable contributions and religious donations	14.	\$	0.00_
	surance.			
D. D.	o not include insurance deducted from your pay or included in lines 4 or 20.			
	ia. Life insurance	15a.	\$	0.00
15	b. Health insurance	15b.	\$	0.00
3.7	5c. Vehicle insurance	15c.	\$	0.00
-	5d, Other insurance. Specify:	15d.	\$	0.00
6 T	axes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
S	pecify:	16.	\$	0.00
7. In	stallment or lease payments: <sup>7</sup> a. Car payments for Vehicle 1	17a.	\$	0.00
		17b.		0.00
	7b. Car payments for Vehicle 2	17c.		0.00
	7c. Other Specify:	17d.		0.00
1	7d. Other, Specify:		Ψ	
8. Y	our payments of alimony, maintenance, and support that you did not report as educted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$	0.00
a a	ther payments you make to support others who do not live with you.		\$	0.00
	pecify:	19.		
0 0	ther real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i>	edule I: Yo	ur Income.	
0. 0	Da. Mortgages on other property	20a.	\$	0.00
	Ob. Real estate taxes	20b.	\$	0.00
	Oc. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	0d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	Oe. Homeowner's association or condominium dues	20e.	\$	0.00
			+\$	0.00
1. C	ther: Specify:		, <del>v</del>	0.00
	alculate your monthly expenses			4 427 00
	2a. Add lines 4 through 21.		\$	1,127.00
2	2b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
2	2c. Add line 22a and 22b. The result is your monthly expenses.		\$	1,127.00
23. C	alculate your monthly net income.			
2	3a. Copy line 12 (your combined monthly income) from Schedule I.	23a.		1,402.18
2	3b. Copy your monthly expenses from line 22c above.	23b.	-\$	1,127.00
	3c. Subtract your monthly expenses from your monthly income.			
2	The result is your monthly net income.	23c.	\$	275.18
24 -	o you expect an increase or decrease in your expenses within the year after y	ou file thi	s form?	
44. <b>L</b>	or example, do you expect to finish paying for your car loan within the year or do you expect yo	ur mortgage	payment to inc	rease or decrease because of a
'n	nodification to the terms of your mortgage?			
-	No.			3 21111111
	Yes. Explain here:			

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thini and m		case:				
Debtor 1	formation to identify your ELBA IRIZARRY					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	DISTRICT OF PUERT	O RICO			
Case number	18-01254					
(if known)					☐ Check if the character amended	
You must file obtaining mo	this form whenever you f	ile bankruptcy schedule n connection with a bar	onsible for supplying corre es or amended schedules. I nkruptcy case can result in	Making a false state	ment, concealing p 0, or imprisonment	roperty, or for up to 20
	10 0.0.0. 33 102, 1041,	1519, and 5571.				·
5	Sign Below	1519, and 3571.				
	Sign Below		orney to help you fill out ba	nkruptcy forms?		
	Sign Below		orney to help you fill out ba	nkruptcy forms?		
Did you ■ No	Sign Below		orney to help you fill out ba	Attach <i>Bank</i>	ruptcy Petition Prepa and Signature (Offic	arer's Notice,
Did you  ■ No □ Yes	Sign Below  pay or agree to pay some s. Name of person	eone who is NOT an atto	orney to help you fill out ba	Attach Bank Declaration,	and Signature (Office	arer's Notice,
Did you No Yes Under pe	pay or agree to pay some s. Name of person enalty of perjury, I declare y are true and correct.	eone who is NOT an atte	mmary and schedules filed	Attach Bank Declaration,	and Signature (Office	arer's Notice,
Did you No Yes Under pethat they	pay or agree to pay some s. Name of person enalty of perjury, I declare are true and correct.	eone who is NOT an atte		Attach Bank Declaration, with this declaratio	and Signature (Office	arer's Notice,
Did you  No Yes  Under pethat they  X /s/ E	pay or agree to pay some s. Name of person enalty of perjury, I declare y are true and correct.	eone who is NOT an atte	mmary and schedules filed X	Attach Bank Declaration, with this declaratio	and Signature (Office	arer's Notice,

nation to identify your case:			
ELBA IRIZARRY CASTRO			
ankruptcy Court for the: _I	District of Puerto Rico		
18-01254			
	ankruptcy Court for the: _[		

Check	as directed in lines 17 and 21:						
According to the calculations required by this Statement:							
<ol> <li>Disposable income is not determined und 11 U.S.C. § 1325(b)(3).</li> </ol>							
	Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
3. The commitment period is 3 years.							
☐ 4. The commitment period is 5 years.							
	☐ Check if this is an amended filing						

### Official Form 122C-1

## Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

	Part	1: Calculate Your Average Monthly Income							
	1.	What is your marital and filing status? Check one or	nly.						
-		■ Not married. Fill out Column A, lines 2-11.							
		☐ Married. Fill out both Columns A and B, lines 2-11.							
	10	I in the average monthly income that you received from all 1(10A). For example, if you are filing on September 15, the 6-me 6 months, add the income for all 6 months and divide the total ouses own the same rental property, put the income from that property.	nonth per I by 6. Fil	riod would It in the res	be March 1 throu sult. Do not includ	gh August 31. e any income	If the amount m	ount of your monthly income varied of ore than once. For example, if both	iuring
-						Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
	2.	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and co	mmissio	ons (before all	\$	0.00	\$	
	3.	Alimony and maintenance payments. Do not include Column B is filled in.	payme	nts from	a spouse if	\$	0.00	\$	
	4.	All amounts from any source which are regularly p of you or your dependents, including child support from an unmarried partner, members of your househol and roommates. Do not include payments from a spou you listed on line 3.	t. Includ d, your	e regular depende	contributions nts, parents,	\$	0.00	\$	
	5.	Net income from operating a business, profession, or farm	Debtor						
		Gross receipts (before all deductions)	\$	0.00					
		Ordinary and necessary operating expenses	<b>-</b> \$	0.00			0.00	•	
		Net monthly income from a business, profession, or fa	rm \$ _	0.00	Copy here ->	\$	0.00	\$	
	6.	The state of the s	Debtor						
		Gross receipts (before all deductions)	\$_	0.00					
		Ordinary and necessary operating expenses	-\$_	0.00	Copy here ->	œ.	0.00	\$	
		Net monthly income from rental or other real property	\$	0.00	copy nere ->	φ	0.00	Ψ	

Best Case Bankruptcy

Official Form 122C-1

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ebtor 1	ELBA IRIZARRY CASTRO		Case number	(if know	(n) 18-01254		
			Column A Debtor 1		Column B Debtor 2 or non-filing s		
7. In	terest, dividends, and royalties		\$	0.0	0 \$		
8. U	nemployment compensation		\$	0.0	0 \$		
De th	o not enter the amount if you contend that the amount received was a benefit ur e Social Security Act. Instead, list it here:	nder					
	For you\$ 0.00						
	For your spouse \$						
	ension or retirement income. Do not include any amount received that was a enefit under the Social Security Act.		\$	450.1	8 \$		
D re do	come from all other sources not listed above. Specify the source and amount on not include any benefits received under the Social Security Act or payments exceived as a victim of a war crime, a crime against humanity, or international or comestic terrorism. If necessary, list other sources on a separate page and put the stall below.						
			\$	0.0	0 \$		
			\$	0.0	0 \$		
	Total amounts from separate pages, if any.	+	\$	0.0	0 \$		
11. C	alculate your total average monthly income. Add lines 2 through 10 for ach column. Then add the total for Column A to the total for Column B.		450.18	+ \$		= \$_	450.18
	copy your total average monthly income from line 11.					\$	450.18
10.	You are not married. Fill in 0 below.						
_							
_	B						
-	Fill in the amount of the income listed in line 11, Column B, that was NOT redependents, such as payment of the spouse's tax liability or the spouse's such	ıppoı	t of someon	e othe	r than you or you	r depend	ents.
	Below, specify the basis for excluding this income and the amount of income adjustments on a separate page.	e dev	oted to eac	h purp	ose. If necessary	, list addi	tional
	If this adjustment does not apply, enter 0 below.	±.					
		\$ \$		-			
	+:						
					7		
	Total\$		0.0	00	Copy here=>	-	0.00
14.	Your current monthly income. Subtract line 13 from line 12.					\$	450.18
15.	Calculate your current monthly income for the year. Follow these steps:						
	15a. Copy line 14 here=>					\$	450.18
	Multiply line 15a by 12 (the number of months in a year).			And the second		X	12
	15b. The result is your current monthly income for the year for this part of the	form.				\$	5,402.16

Case:18-01254-EAG13 Doc#:20 Filed:05/02/18 Entered:05/02/18 10:38:43 Desc: Main Document Page 13 of 15 18-01254 ELBA IRIZARRY CASTRO Case number (if known) 16. Calculate the median family income that applies to you. Follow these steps: PR 16a. Fill in the state in which you live. 1 16b. Fill in the number of people in your household. 23,945.00 16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 17b. 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) Part 3: 450.18 18. Copy your total average monthly income from line 11. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 450.18 \$ 19b. Subtract line 19a from line 18. 20. Calculate your current monthly income for the year. Follow these steps: 450.18 20a. Copy line 19b x 12 Multiply by 12 (the number of months in a year). 5,402.16 20b. The result is your current monthly income for the year for this part of the form 23,945.00 \$ 20c. Copy the median family income for your state and size of household from line 16c 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.

Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years*. Go to Part 4.

#### Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

#### X /s/ ELBA IRIZARRY CASTRO

**ELBA IRIZARRY CASTRO** 

Signature of Debtor 1

Date May 2, 2018

Official Form 122C-1

MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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**ELBA IRIZARRY CASTRO** 

Case number (if known) 18-01254

### **Current Monthly Income Details for the Debtor**

**Debtor Income Details:** 

Income for the Period 09/01/2017 to 02/28/2018.

Line 9 - Pension and retirement income

Source of Income: PENSION

Constant income of \$450.18 per month.

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period ELBA IRIZARRY CASTRO CALLE ALCAZAR 305 URB. SULTANA MAYAGUEZ, PR 00680

/S/ GLORIA JUSTINIANO IRIZARRY CALLE A. RAMIREZ SILVA #8 ENSANCHE MARTINEZ MAYAGUEZ, PR 00680

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